

lower limbs in one case, and involvement of all four extremities in the other; absence of tendon reflexes, and vasomotor changes in one. conducted themselves quite like poliomyelitis. The following differential points served to make the diagnosis clear; both conditions existed from birth, no reaction of degeneration in the muscles, the paralysis did not tend to become localized, all the affected muscles showed some mobility, muscles were atonic rather than atrophic. The condition is also differentiated from myxedema, mongolismus, and rickets. The facts that myatonia is always congenital, reflexes diminished or absent, and that the muscles show quantitative changes are strongly emphasized. Some importance is attached to the early manifestation of symptoms—usually the first day of birth—their nonprogressive nature, and the escape of cranial and sensory nerves. Ten cases, studied in the literature, showed some improvement after thirty-one months.

The remaining half of the monograph is devoted to the study of poliomyelitis and polyneuritis. The possibility that the two diseases may coexist, is admitted, but the author seems inclined to the view that polyneuritic symptoms can and do manifest themselves in the course of a poliomyelitis, independently of any inflammatory condition in the peripheral nerves. In fact, such cases, studied microscopically, failed to show any evidence of neuritis, but rather a widespread inflammatory condition involving not only the anterior horn cells, but the posterior horn, meninges, medulla, pons, and even cerebrum. Upon these findings he explains the occasional sensory disturbances observed in poliomyelitis, such as, hyperesthesia, hyperalgesia, and even anesthesia.

In conclusion he mentions a number of differential points; the more important of which are tabulated below:

*Poliomyelitis*.—(1) Paralysis reaches its acme at the beginning. (2) Absence of swollen nerve trunks. (3) Frequent in children. (4) Cranial nerves seldom involved. (5) Paralysis usually not widespread, may be bilateral, but not symmetrical. (6) Involvement of bladder and rectum not infrequent. (7) Complete recovery rare.

*Polyneuritis*.—(1) Often several days or weeks before paralysis is fully developed. (2) Can usually be palpated. (3) Rare in children. (4) Not at all uncommon. (5) Usually bilaterally symmetrical. (6) Rare. (7) Quite common to a great degree.

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THE BORDERLAND OF EPILEPSY. Faints, vagal attacks, vertigo, migraine, sleep symptoms and their treatment. By Sir Wm. R. Gowers, M.D., F.R.C.P., F.R.S. P. Blakiston's Son & Co., Philadelphia.

This unpretentious volume of 118 pages is a welcomed contribution to the more stable literature of preepileptic states and neuroses. Whoever has made patient inquiry into the corelationship between many constitutional nervous disorders, cannot help being impressed with the fact that before he studies epilepsy proper, he must studiously investigate a large category of nervous phenomena less distinct than true epilepsy, generally less harmful in results, but quite as important in many ways as the essential disease.

The six chapters in "The Borderland of Epilepsy" deal with faints and fainting, and their relationship to true epilepsy; Chapter 2 takes account of vagal, vaso-motor, and tetanoid spasms; while Chapters 3

and 4 consider vertigo with its characteristic symptoms and points of differential diagnosis from true epilepsy. It is quite plain the author believes there is a positive relationship between migraine and epilepsy since he devotes more than 25 pages to migraine alone. His consideration of sleep symptoms—such as “night terrors,” “somnambulism,” “half waking” and “narcolepsy” are of much interest and not to be ignored by the neurologist who would acquire a true conception of certain phenomena that precede, accompany, or follow manifestations of essential epilepsy.

Dr. Gowers' latest book has real value for physicians who have been some years out of medical college and who are tending to specialism. The student and general practitioner will hardly find its advanced teachings adaptable to their requirements.

WILLIAM P. SPRATLING.

*HYPNOTIC THERAPEUTICS IN THEORY AND PRACTICE.* By John Duncan Quackenbos, M.D. New York and London. Harper & Brothers, 1908.

There is no reason especially why this book should be either reviewed or read by the physician. It is apparently written with the view of placing the author's thoughts before a public in whom discrimination, critical judgment, and a sense of the ridiculous are entirely absent. The place where this book touches the physician is in the class of patients to whom the ideas advanced in it are received as though they were novel and true. Against such an influence medical criticism can with justice be directed. It is a pertinent question as to the reason why books of this kind are written nearly always in a certain extravagant, intense and rather inflammable style. Does the practice of hypnotism, as the author of this book uses it, so dissociate the mind of the operator that the normal and average regard for accuracy, proportion and fact is lost sight of? The possibility of this book and others like it being the products of a subliminal consciousness is a fascinating thing to contemplate. To arouse investigation into this new field may be regarded as the chief virtue of this work on hypnotic therapeutics.

SIDNEY I. SCHWAB.

*TECHNISCHER FORTSCHRIFT UND SEELISCHE GESUNDHEIT.* Von Willy Hellpach, Dr. Med. et Phil., Privatdozent der Psychol. Carl Marhold, Halle.

The author argues that psychology should have an equal share in the curriculum of the technical school with other branches of study; psychology builds no bridges or machines but what concerns everyone, be he technically engaged builder or machinist, is the care of mental health. What influence has the rapid change in the technical world had upon the mental health of man? Insanity is not perhaps markedly increased but the neuroses have become decidedly more common. It is not so much the result of strenuous life on the individual as on the progeny, who do not stand the strain, but the technical avalanche of the last hundred years has been the cause of many a sound mind being crushed. Workers at monotonous trades and pursuits all contribute a quota to neurasthenia, and it is for this reason that the care of mental health should be taught in all technical schools.

S. D. LUDLUM.